



Town of Riverhead Building Department

201 Howell Avenue, Riverhead, New York 11901

(631) 727-3200 Ext. 283, 213, 268

Fax: 631-208-8039

www.riverheadli.com

Sharon E. Klos
Building Permits Coordinator

Richard E. Gadzinski
Electrical Inspector

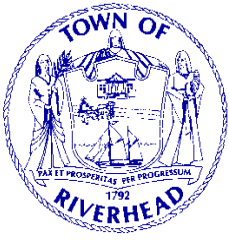
Richard Podlas
Inspector

Mark Griffin
Inspector

Jack Wherry
Inspector

Requirements for a Commercial Building Permit

1. Commercial Building Permit Application (signed and notarized);
2. Disclosure Affidavit (signed and notarized);
3. Inspection and Certificate of Occupancy information sheet (signed and dated);
4. Electrical Application (signed, notarized and submitted with permit application);
5. Dark Skies Compliance Acknowledgment (signed and notarized);
6. Three (3) surveys, one with Suffolk County Department of Health approval if required, showing location of project on premises; **FOR NEW CONSTRUCTION: UNDER CONSTRUCTION SURVEY AFTER FOUNDATION POUR IS REQUIRED.**
7. Two (2) sets of building plans (signed and sealed by NYS licensed architect or engineer) must include square footage, estimated cost of construction, and height above grade of finished construction.
8. Two (2) sets of building elevation plans with materials and colors stipulated
9. New York State Energy Conservation Construction Code calculations (when applicable)
10. Proof of Liability Insurance, Worker's Compensation Insurance Form C-105.2 or U26.3 and NYS Disability, form DB 120.1, showing the property owner and property location. Must list the Town of Riverhead as additional insured.
11. Fee is determined through review of estimated construction cost and submitted plans and you will be notified.
12. Plans and survey dimensions must comply with Chapter 52-6 (D);
13. Processing of application begins upon receipt of required fees.
14. LIPA, Water, Sewer disconnect and Asbestos Abatement notices are required where demolition is involved;
15. Sign permits and fire prevention permits are applied for separately.
16. Single and separate title search is required for nonconforming lots. effective 1/1/02
17. Copy of recorded covenants and restrictions (when applicable) effective 1/1/02



APPLICATION FOR BUILDING & ZONING PERMIT

201 Howell Avenue, Riverhead, New York 11901
631-727-3200 ext. 213, 268 and 283 Fax: 208-8039

www.riverheadli.com

Tax Map # _____ - _____ - _____

Application No. _____ Date _____ Permit No. _____ Receipt _____

Approved by _____ Zoning District _____ Building Fee \$ _____ Electrical Fee \$ _____

All information below to be filled out by applicant. A PERMIT MUST BE OBTAINED BEFORE BEGINNING WORK. This application is to be submitted accompanied by building plans drawn to scale in duplicate, showing elevations, floor plans, run and size of joists, rafters, girders, details of footings and foundation, schematic of plumbing and electrical layouts and grade and species of lumber and quality of all material where applicable.

THE OWNER OF THE PROPERTY IS: (PLEASE PRINT CLEARLY)

First Name Last Name Business Name

Mailing Address Town State Zip

Phone Contact Fax Email Address

Property Location of Proposed Work

CONTACT PERSON (if different from owner) The person responsible for the supervision of the work insofar as the Building Code and the Zoning Ordinance apply is:

First Name Last Name

Mailing Address Town State Zip

Phone Contact Fax Email Address

- | | |
|--|---|
| <input type="checkbox"/> Residential - Estimated value of proposed construction \$ _____ | <input type="checkbox"/> Deck |
| <input type="checkbox"/> Commercial - Estimated value of proposed construction \$ _____ | <input type="checkbox"/> _____ Car Attached/Detached Garage |
| <input type="checkbox"/> Single Family Residence | <input type="checkbox"/> New Commercial Structure |
| <input type="checkbox"/> Manufactured/Modular Home | <input type="checkbox"/> Bulkhead/ Dock |
| <input type="checkbox"/> Excavation/Land clearing: approx _____ cu.yds. removed | <input type="checkbox"/> Demolition |
| <input type="checkbox"/> Addition | <input type="checkbox"/> Agricultural Worker Housing |
| <input type="checkbox"/> Alteration | <input type="checkbox"/> Condominium |
| <input type="checkbox"/> Accessory Structure | <input type="checkbox"/> Use Permit _____ |
| <input type="checkbox"/> Swimming Pool | <input type="checkbox"/> Miscellaneous _____ |

Pool Specifications (if applicable)

- | | | | |
|------------------------------------|---------------------------------------|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> In ground | <input type="checkbox"/> Above ground | <input type="checkbox"/> Hot tub/spa | <input type="checkbox"/> Heater _____ |
| Electric/Gas | | | |

APPLICATION FOR BUILDING & ZONING PERMIT

Please describe project and/or special conditions:

ZONING SPECIFICATIONS: Fill in for new building, or addition to existing building or a change of occupancy. Indicate on the plot plan in triplicate, street names, the location and size of property, the location and setbacks of proposed buildings and existing buildings. Show proposed buildings in dotted lines and existing buildings in a solid line. All distances are measured from property line to nearest part of building. **All work must be in compliance with the New York State Building Code and Fire Prevention Code.**

Proposed building _____ sq. ft.

Second floor _____ sq. ft.

Proposed addition _____ sq. ft.

Garage _____ sq. ft.

Ground floor _____ sq. ft.

Height (from grade to ridge) _____ ft.

Number of bedrooms _____

Impervious surface _____ %

Electrician: _____ License# _____

Mailing Address

Town

State

Zip

Plumber: _____ License# _____

Mailing Address

Town

State

Zip

Contractor: _____ License# _____

Mailing Address

Town

State

Zip

AFFIDAVIT

Town of Riverhead)

County of Suffolk) s.s.

State of New York)

I swear that to the best of my knowledge and belief the statements contained in this application, together with the plans and specifications submitted, are true and complete statements of proposed work to be done on the described premises and that all provisions of the Building Code, Zoning Ordinance, and all other laws pertaining to the proposed work shall be complied with, whether specified or not, and that such work and inspections are authorized by the owner.

Sworn to be before this _____ day

Signature _____

Owner, Agent or Architect

of _____ 20 _____

Notary Public, Suffolk County, New York

Read this document carefully.
You may consult your attorney before completing.

Disclosure Affidavit

STATE OF NEW YORK)

SS:

COUNTY OF SUFFOLK)

I, _____ an applicant for the following
relief: _____ and being duly sworn, deposes and says:

under the penalty of perjury and swear to the truth thereof.

That I understand that this affidavit is required by Section 809 of the General Municipal Law and that a
knowing failure to provide true information is punishable as a misdemeanor. Being so warned, I state:

That _____ is a State Officer, is an officer or employee of Riverhead Town
(Name of Relative)
and:

☐ ***Check here if not applicable (i.e., you have no relative working for the Town of Riverhead.)
and please sign below before a notary public.***

That this person has an interest in the person, partnership or association requesting the above stated relief.

That for the purpose of this section, an officer or employee shall be deemed to have an interest in the applicant where
he, his spouse, or their brothers, sisters, parents, children, grandchildren or the spouse of any of them.

- a. is an applicant,
- b. is an officer, director, partner or employee of the applicant,
- c. legally or beneficially owns or controls stock of a corporate applicant or is a member of a partnership or association, applicant, or
- d. is a party to an agreement with such an application, express or implied whereby he may receive any payment or other benefit, whether or not for services rendered, dependant or contingent upon the favorable approval of such application, petition or request.
- e. That ownership of less than five (5) per cent of the stock of a corporation whose stock is listed on the New York or American Stock Exchange shall not constitute an interest for the purpose of this section.

(Signature)

Sworn to before me this _____ day

of _____, 20____

Notary Public

Town of Riverhead Building Department

ZB NO. _____

4 MONTH EXP. _____

12 MONTH EXP. _____

INSPECTION & CERTIFICATE OF OCCUPANCY INFORMATION SHEET

An inspection must be made by the building department within four (4) months. Applicant must notify the building department for inspections. Construction must be completed and certificate of occupancy must be obtained within twelve (12) months.

The following inspections are required. **Three day notice for inspections is necessary.**

- 1st Inspection: Foundation before backfill (must be damp proofed where applicable). Footings for decks.
- 2nd Inspection: Under slab plumbing, perimeter insulation, and slab preparation before slab is poured.
- 3rd Inspection: Sill plates fastened to foundation.
- 4th Inspection: Strapping
- 5th Inspection: Sheathing
- 6th Inspection: Ice / weather shield protection.
- 7th Inspection: Framing before insulation is applied (includes rough wiring / plumbing) must have air & water test.
- 8th Inspection: Inspection of rough wiring by Town's electrical inspector.
- 9th Inspection: Insulation
- 10th Inspection: Sheetrock (fire rated) on both sides of garage walls, inside of house & inside of garage.
- 11th Inspection: The finished building / electrical inspections (ready for occupancy) all construction completed.

After the required inspections are made, a Certificate of Occupancy must be issued prior to occupying the subject building(s). The following documents are required to be submitted after all of the work is complete:

- ☐ Final Survey (by licensed surveyor) when applicable
- ☐ Electrical Inspectors final Certificate of compliance (issued by the Town of Riverhead Electrical Inspector)
- ☐ Suffolk County Health Department Approval (if required and/or necessary)
- ☐ Plumbers Affidavit of lead content (if required and/or necessary)
- ☐ Final Floor Affidavit
- ☐ Planning Department fees receipt, when required
- ☐ Final inspection and certificate of compliance by the Fire Marshal (when applicable)
- ☐ Approvals from Department of Environmental Conservation and Conservation Advisory Council when applicable, (i.e., when proposed construction is within 150 feet of the boundary of tidal waters, tidal wetlands, freshwater wetlands, natural drainage systems, or other watercourses)
- ☐ Dark Skies Compliance Acknowledgement, if applicable – Please review Outdoor Lighting Code, Chapter 108-246;

The Certificate of Occupancy will be issued after a processing period of at least Seventy-two hours (72) from the time all of the required documents are submitted to this office.

No building may be used or occupied in whole or in part, until a Certificate of Occupancy shall have been issued by the Building Inspector. (All new construction)

No building enlarged, extended or altered, or upon which work has been performed, which required a building permit, shall be occupied or used more than Thirty (30) days after completion, unless a Certificate of Occupancy shall have been issued by the Building Inspector. (All additions, alterations, etc.)

All debris created by land clearing and during construction must be removed from the property. No debris is to be used in backfill of footings and foundation or is to be buried.

The owner/contractor is responsible for all drainage and flooding issues as provided by Section 52-6 (l) of the Town Code.

The person responsible for this site must call in for all inspections listed above.

Signature: _____

Date: _____

SCTM# _____ - _____ - _____ ZB# _____ Receipt No. _____

Application for Electrical Inspection

Town of Riverhead

(631) 727-3200 EXT. 213, 268, 283

Fax (631) 208-8039

Owner of Property: _____ Phone No. _____

Property Mailing Address: _____

Location of Job: _____ Hamlet: _____

Name of Contractor responsible for electrical installation:

Business Name in full: _____ License # _____

Mailing Address: _____

Cell #. _____ Phone # _____ Fax #. _____

State use of premises: ☐ Residential ☐ Commercial Nature of Work: _____

[] Exposed [] Concealed [] New [] Old Area of proposed construction in total square feet: _____

Service Information:

Temp Requested ☐ Size of Mains: _____ Feeders: _____

Service Enters Building: ☐ Overhead ☐ Underground

Application fees are made payable to the Town of Riverhead Fee: _____ Type Code: _____

APPLICATION IS HEREBY MADE to the Building Department as per Chapter 52 of the Code of the Town of Riverhead.
STATE OF NEW YORK COUNTY OF SUFFOLK

_____ being duly sworn deposes and says that he/she
is the applicant above named.

He/She is the _____ of said owner or owners, and is duly authorized to perform or have
performed the said work and file this application: that all statements contained in this application are true to the best of his/her knowledge and
belief: and that all work will be performed in the manner set forth in this application and in the plans and specifications filed herewith.

Sworn to before me this _____ day

Of _____ 20____ Signature of Electrician _____

Notary Public _____

For Office Use Only

Date:	Inspection	Remarks:

Town of Riverhead
Building Department
755 East Main Street
Riverhead, NY 11901

Phone: 631-727-3200
Ext. 213, 268, or 283
Fax: 631-208-8039

Dark Skies' Compliance Acknowledgement
Town of Riverhead Lighting Ordinance Chapter 108-246

Property Owner

Property Address

Suffolk County Tax Map Number: 0600-_____-_____-_____

Permit No. ZB _____

I, _____, New York License # _____

☐ Electrician or ☐ Homeowner

doing business as _____
Name of Business

residing (or doing business) at _____,

being duly sworn, depose and says that;

☐ I am the Electrician for the above referenced property; that I currently have a valid New York State Electrician's License; and

☐ I am the homeowner; and

That the Outdoor Lighting installation is complete, that said installation conforms to the provisions of Chapter 108-246 of the Riverhead Town Code and the National Electrical Code; and that I understand that the Town of Riverhead will rely on this sworn statement as a condition to issuing the Electrical Certificate of Compliance for the above described work:.

Town of Riverhead)
County of Suffolk) ss.
State of New York)

Signature: _____

False statements made herein are punishable as a class "A" misdemeanor pursuant to § 210.45 of the Penal Law, State of New York.

Sworn to before me this _____ day

of _____, 20_____.

(Notary Public, Suffolk County, New York)